

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		
O.I.P.E. CLASSIFIER	06/15/00		
FORMALITY REVIEW	6-300		
RESPONSE FORMALITY REVIEW	Sauer	515	7-31-00
	RT		10-25-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	-	5/1/00
2	✓	✓	5/1/00
3	✓	✓	5/1/00
4	✓	✓	5/1/00
5	✓	✓	5/1/00
6	N	N	
7	N	N	
8	N	N	
9	N	N	
10	N	N	
11	N	N	
12	N	N	
13	N	N	
14	✓	✓	5/1/00
15	✓	✓	5/1/00
16	✓	✓	5/1/00
17	✓	✓	5/1/00
18	✓	✓	5/1/00
19	✓	✓	5/1/00
20	✓	✓	5/1/00
21	✓	✓	5/1/00
22	✓	✓	5/1/00
23	✓	✓	5/1/00
24	✓	✓	5/1/00
25	✓	✓	5/1/00
26	✓	✓	5/1/00
27	✓	✓	5/1/00
28	✓	✓	5/1/00
29	✓	✓	5/1/00
30	N	N	
31	N	N	
32	N	N	
33	✓	✓	5/1/00
34	N	N	
35	N	N	
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If more than 150 claims or 10 actions
staple additional sheet here

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